

# SweetTree Home Care Services Limited

# SweetTree Home Care Services

## Inspection report

Coleridge House  
2-3 Coleridge Gardens, Swiss Cottage  
London  
NW6 3QH

Date of publication:  
18 December 2020

Tel: 02076249944  
Website: [www.sweettree.co.uk](http://www.sweettree.co.uk)

## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Inspected but not rated

Is the service caring?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

This report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the COVID-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

### About the service

SweetTree is a domiciliary care agency which provides personal care to people living in their own homes. At the time of our inspection, the agency provided support to a range of people including live-in-care. These included older people and people living with dementia, people with brain injuries and neurological conditions and people with learning disabilities. At the time of our inspection, the service was providing care to approximately 285 people. Each area of the service provision had its own specific care team led by a member of the management team. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

### People's experience of using this service and what we found

People using SweetTree and their relatives gave us excellent feedback about the service. They all said they would recommend the service to others. People using the service, their relatives, staff and external health and social care professionals all said that SweetTree dealt admirably with challenges posed by the pandemic and were able to provide a high quality of care.

We found that SweetTree had built on the previous high standards we had found. Since our last inspection SweetTree had launched a range of new initiatives to support people using the service, their families and the wider community. These included an upgraded internet website to respond to enquiries quicker. There was also an improved accidents, incident and complaints reporting system allowing staff and people to have instant access to the information and the support of managers when needed.

We found that SweetTree had responded to the Covid-19 pandemic in a systematic and well thought out way. There was a range of good practice which resulted in positive outcomes for people. These included the corporate pre-planning work to address the challenges of care provision during the pandemic. It also included the successful procurement of enough appropriate personal equipment planning. The individualised COVID-19 risk assessment of all people using the service and staff. The regular and current infection control training and emotional and practical support for people, their families and staff.

SweetTree's mission, vision, values and ethics were at the heart of all decisions made by the senior management team. Anchored to that, thoughtful consideration of the service needs and bold and quick implementation of new ways of working meant that the service could provide the best care during the most challenging times.

The governance of the service was outstanding. Managerial responsibilities were allocated with consideration of specific roles as well as individual skills, experience, interests and talents of each manager. This meant the governance of the service was highly effective. The senior management team promoted career development within the service. They introduced a leadership and management framework to help to develop future leader and managers within the service.

Staff knew what was expected of them. Their roles were clearly defined through individual role descriptions for specific departments within the service. Staff skills were regularly improved through a range of training available from the service's training academy. Staff were also regularly monitored through managerial checks of their direct work with people as well as regular supervision.

Staff were extremely caring for people who used the service and their families. All people and relatives spoke highly of staff who supported them. They said that although the COVID-19 pandemic affected the intensity of the support provided, staff still did all they could to reduce the impact of the pandemic on people. Staff contribution had been recognised by the service through the yearly Sweet Awards for the best care staff. Nominations for these awards were given by people who used the service.

Staff supported people to reach their full potential despite their health condition and wellbeing. There were detailed and personalised care plans formulated as a result of a collaboration between people using the service, their relatives and professionals. This meant that people were receiving care they needed and wanted. The individualised care was enhanced by skilful matching of care staff with people according to their interests, staff skills and experience.

Medicines were managed safely. People were protected from abuse by safely recruited and appropriately trained staff. Risks to people's health and wellbeing had been assessed and staff had detailed guidelines about supporting people safely.

People told us they had lots of opportunities to provide feedback about the service. This was done through regular reviews and frequent contact with members of the management team. People and relatives told us that when issues arose, these had been dealt with quickly and to their satisfaction.

SweetTree had a range of community initiatives. They acted to support the local community and the general public by running webinars about later life, dementia and coronavirus to increase awareness about these topics. They also collaborated with the Skills for Care Charity and chaired the London Central registered manager network which supported registered manager from other services in London during the COVID-19 pandemic.

We received feedback from 20 external health and social care professionals who all gave a positive view of the service. They commended the service for a high level of training, the positive and caring attitude of staff towards people and their relatives and the excellent management of the service.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service this practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. The model of care maximised people's choice, control and, independence. Care was person-centred and promoted people's dignity, privacy and human Rights. Ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection The last rating for this service was outstanding (published 08 January 2018).

#### Why we inspected

This was a planned pilot virtual inspection. The report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the COVID-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

The pilot inspection considered the key questions of safe and well-led and provide a rating for those key questions. Only parts of the effective, caring and responsive key questions were considered, and therefore the ratings for these key questions are those awarded at the last inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for SweetTree Home Care on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our safe findings below.

Good 

### Is the service effective?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to effective.

Inspected but not rated

### Is the service caring?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to caring.

Inspected but not rated

### Is the service responsive?

At our last inspection we rated this key question outstanding. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to responsive.

Inspected but not rated

### Is the service well-led?

The service was exceptionally well-led.

Details are in our well-led findings below.

Outstanding 

# SweetTree Home Care Services

## **Detailed findings**

### Background to this inspection

#### The inspection

As part of a pilot into virtual inspections of domiciliary and extra-care housing services, the Care Quality Commission conducted an inspection of this provider on 10, 11 and 12 November 2020. The inspection was carried out with the consent of the provider and was part of a pilot to gather information to inform CQC whether it might be possible to conduct inspections in a different way in the future. We completed this inspection using virtual methods and online tools such as electronic file sharing, video calls and phone calls to gather the information we rely on to form a judgement on the care and support provided. At no time did we visit the provider's or location's office as we usually would when conducting an inspection.

#### Inspection team

This inspection was carried out by two inspectors, one pharmacy inspector and six Experts by Experience. An Expert by Experience (ExE) is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

Before the inspection, we carried out telephone interviews with 17 people using the service and 57 family members who gave their feedback on behalf of their relatives who could not do it themselves due to their health condition. We emailed and asked for feedback from care staff employed by the service and 15 staff responded. We received feedback from 20 external health and social care professionals. We reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed other information about the service such as satisfaction questionnaires that are sent to people using the service and their relatives prior to our visit and from notifications the provider is required to submit to the Care Quality Commission. Additionally, we requested that the provider uploaded on our online systems documents related to the service delivery so we could review them remotely.

#### During the inspection

During our visit, we spoke with the registered manager, the agency's founder, the chief executive officer (CEO) who was also the nominated individual and two members of the care staff team. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records. This included 38 people's care records and multiple medication records. We looked at 10 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Preventing and controlling infection

- The provider did everything possible and more to ensure people using the service and staff were safe during the COVID-19 pandemic. This was achieved through thoughtful planning from the very early stages of the pandemic. In February 2020 the senior management team in conjunction with the SweetTree Advisory Board formulated a COVID-19 staged contingency plan. It outlined actions required to respond to the pandemic. They brought in initiatives to make sure they had PPE, to support staff so they could provide care without interruption and to work with service users to reduce their anxiety. They invested in training, transport costs and time resources. Consequently, in March 2020 the service was prepared as much as they could for the pandemic. The contingency plan had been regularly reviewed and by August 2020 the service had already prepared for the second expected Covid 19 wave. We judged that this approach had impressive results. Out of 285 people using the service only one person tested COVID-19 positive, and only seven staff out of 400 tested COVID-19 positive. A smooth service was therefore provided to people despite the impact of the pandemic nationally.
- Whilst people noticed that there had been difficulties in 2020 due to COVID-19, they all told us they had been impressed with how the agency had coped overall and their relatives had not suffered as a result of any reduction in service at all. Relatives told us, "The service explained in an email everything about COVID-19" and "I stopped the service briefly in March/April because I was so scared. But they are really good, they send us masks and information about keeping safe."
- Staff received additional infection control training. Following the training, the provider carried out monitoring calls with staff to ensure they understood how to protect themselves and people from COVID-19. One staff member told us, "From the very beginning we were receiving official guidance and advice for homecare providers in England on COVID-19. It is mandatory to complete assigned PPE guidance and COVID-19 training webinars on our training website. We are receiving sufficient PPE and our managers regularly enquire if we need more supply."
- Each service user was individually assessed for the type of PPE they needed. The assessment included people's individual health conditions, needs and preferences. The service took steps to ensure people felt at ease with care staff wearing PPE while supporting them. One person, due to their health condition, struggled with care staff wearing a mask. The service prepared easy-read materials and a social story to help the person understand the purpose of PPE. As a result, the person became comfortable with the care staff wearing a mask.
- We were assured that the provider was meeting shielding, social distancing and self-isolation rules. In one case, a care staff member stayed with a person through the whole period of their self-isolation. The provider supported them by delivering food so the staff member did not have to go out shopping. This reduced the risk of the person and the care staff getting an infection or passing it to others. This also helped to reduce the possible effects of self-isolation on the mental health of the person using the service.



- We were assured that the provider was using PPE effectively and safely and that the PPE supply was always sufficient. The stocks were regularly monitored and the service employed drivers to ensure PPE was delivered quickly and safely.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed. Staff were encouraged to access a yearly flu vaccination via their GP surgery and COVID-19 testing. As much as possible staff visited the same people to reduce the risk of infection. The provider hired cars and drivers to transport staff to care visits. This helped to reduce the need to use public transport when travelling to the most vulnerable people and when the care staff were in the vulnerable group themselves.
- We were assured that the provider's infection prevention and control policy was up to date. It was last updated in October 2020 and included current guidelines on infection prevention and control measures. Further policies were introduced to guide staff on how to stay safe during the COVID-19 pandemic. These included a handwashing policy and a car hire policy.
- Staff were monitored for any symptoms of COVID-19 and they were asked to self-isolate where there was a risk they were exposed to the infection.

#### Learning lessons when things go wrong

- The provider managed accidents and incidents to a high standard. In April 2020 the provider introduced a new accidents and incidents reporting system. It allowed every member of the SweetTree team to report any concerns instantly and directly to a member of the management team. It benefited people because a member of the respective management team could promptly review any concerns around peoples' health and well-being. As a result, the care staff had instant access to advice and guidance on what action to take to ensure people were safe.
- In case of one person, who returned from hospital, a care staff noticed bruises on the person's arm and that their pressure sore had worsened since being in hospital. The accidents and incidents procedure was used so the correct manager received information about the person's condition promptly. They took immediate action and a district nurse came out the next morning to assess the person's pressure sore and bruises.
- The senior management team undertook monthly review of all accidents and incidents for possible themes and patterns. The review was followed by a detailed report and plan on improvement actions to ensure similar accidents and incidents did not happen again.

#### Systems and processes to safeguard people from the risk of abuse

- People and relatives consistently stated people were safe with staff supporting them. One person told us, "I feel safe, of course, I'm in good safe hands." One family member said, "I feel secure when I'm at work that he is being looked after well. They understand him."
- Staff received training in safeguarding and their understanding around protecting people from harm and abuse was checked and marked by tutors in a post-training knowledge test. Therefore, staff were skilled to recognise if people were at risk of harm. One staff member told us, "I am aware of signs of physical harm and will update records, inform management and check whether these are symptomatic of underlying illness and/or malnutrition ill health effects."
- Five safeguarding concerns had been raised with the service within the past 12 months. We saw that the concerns were thoroughly investigated and each part of the investigation process was recorded in detail for further reference.
- When safeguarding issues were raised, the provider worked closely with the local authority and relevant health and social care professionals to ensure the best possible action was taken to protect people from harm and abuse.

#### Assessing risk, safety monitoring and management

- Care plans had been devised along with risk assessments, which gave staff guidance to support people safely. Risk assessments included moving and positioning, medication, diabetes and falls. Risk assessments also included comprehensive details of preventative measures in place to reduce the possibility of the potential risk occurring.
- Risk assessments were specific to people's individual needs and records clearly reflected this.
- Environmental risk assessments of people's homes were carried out. These included information about how to access the person's property and how to use equipment in the home safely.
- People using the service had COVID-19 risk assessments in place to ensure their individual health conditions and circumstances were considered to help minimise the risk of getting the infection.

#### Staffing and recruitment

- There were sufficient staff deployed to ensure scheduled care visits had taken place as agreed. The provider had an effective monitoring system therefore any staff absences were covered and people were informed promptly of any changes. Staff attendance records showed that staff were usually on time and the consistency of visits by the same care staff was very high. Where there was a change to a visit this was effectively monitored and outcomes recorded for future reference. One relative told us, "They are always on time. We are never without someone being here and we have never experienced any missed calls."
- The provider had safe recruitment procedures. We looked at recruitment records for 10 staff members who commenced their employment within the last 12 months. Recruitment checks were undertaken as required by national guidelines. These included two references from the previous employer and character references, proof of identity, right to work and Disclosure and Barring Service checks (DBS). DBS checks for all staff had been completed. The DBS helps employers make safer recruitment decisions and prevent the appointment of unsuitable people.
- New staff were closely monitored during their three months' probation period. We saw that when needed the probation period was extended to ensure they fully met the criteria required for working at SweetTree.

#### Using medicines safely

- Records showed people using the service received their medicines as prescribed. Managers and staff carried out regular checks of medicines and their records.
- Staff had relevant information available to them to enable them to give people their medicines consistently and appropriately. One relative told us, "Live-in care allows her to get the medication that she needs at the correct times and it just works like clockwork. We've never had any problems with medication either being missed or late."
- People using the service were encouraged to maintain independence and look after their own medicines when safe and appropriate to do so. Each had in place a care plan and risk assessment about their medicines.
- Care staff giving people their medicines had received training and regularly had their competence assessed in line with national guidance. One staff member told us, "Manager does audits and does daily checks. Training is second to none and the organisation is very supportive."

## Is the service effective?

### Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The provider ensured people consented to their care and treatment. Care records included an assessment of people's mental capacity. For people who lacked the mental capacity to make decisions about their care, the provider consulted with their representatives to help ensure decisions were made in their best interests. Assessments and the meetings where decisions were discussed were recorded.
- There was documented evidence to show people had consented to their care plan. Records detailed who should be consulted when making decisions. There was information to show who had the legal authority to make decisions on people's behalf.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection, this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Ensuring people are well treated and supported; respecting equality and diversity

- People and family members continuously gave very positive feedback about staff who supported them and the managers at the SweetTree. Relatives said, "Care staff are very, very caring and dedicated people. They are, not jobsworths" and "They are very reliable, very caring. They have exceeded my expectations."
- Staff continued supporting people even when the level of support had to be changed due to the coronavirus pandemic. One person using the service said, "My designated team is very good and carers understand me well. My carer helps me with paperwork, arranging holidays and accessing the community safely. Because of COVID-19 remote sessions are taking place with my carer and it's a perfect time. We just had a FaceTime call which suits us both." Relatives told us, "They are lovely people. The boys (care staff) are still phoning to check how things are even though they haven't seen him since the beginning of the lockdown. SweetTree are good at matching care staff to my relative."
- Peoples' care plans included information about their interests and hobbies. Staff were matched with people based on their interests and preferences. Relatives said, "It is a really good professional service. We are very happy with them. My relative was involved in choosing the person he wanted to be his main supporter" and "My relative was given a choice of a carer; he chose female carers which was put forward and respected."
- When needed staff support was extended to family members. One relative told us, "When she doesn't see the staff she always asks about them and she likes them all. They have developed rapport and staff often go above and beyond. For example, I was exhausted and one of them stayed over time so that I could rest a little. They are supportive and understanding of us."
- Staff received training in equality and diversity to ensure they had good knowledge and understood the different ways people lived. One staff member told us, "SweetTree encourage etiquette at work, punctuality and to respect the culture and diversity of others. If there is a religious celebration event, they will send out information so that staff are aware, prepared and understand its significance. I am made aware of different cultural events so I can respect others' faith, be cultured and knowledgeable."

Supporting people to express their views and be involved in making decisions about their care

- People and relatives told us that staff involved people in making decisions about their care. One relative said, "Care staff are inclusive with the decisions around care and communication is good. My relative's eyesight is now poor, he can't read written correspondence so everything is discussed with him face-to-face. He likes all the staff, they get on well."
- Staff promoted people's independence as much as possible. One staff member told us, "I encourage my clients to speak up and allow them time to make choices and I do not do so on their behalf, I let them

choose their diet, their activities in the home, whether they want to go out or not, and how they want to plan their access to community services."

- People and their relatives were always fully involved in making decisions about their care. Staff supported people to reach their full potential despite their health condition and wellbeing. Highly personalised and detailed care plans were formulated and reviewed in collaboration with people, their relatives and respective professionals. One family member said, "My relative is non-verbal and needs structure so things are carefully planned. The carer is very organised and follows the plans. My relative is comfortable and they do everything together so consent is implied by co-operation". A health care professional told us, "SweetTree carers can draw on expertise and knowledge from a wide range of health disciplines. The real skill, which I have seen in action, is putting a team together to obtain maximum care output for a happy, healthy patient."
- Staff were provided with information on people's ability to make decisions about their care. We saw that people's care plans included a reference to their ability to consent and make decisions about their care.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Outstanding. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received personalised care and support. People and their relatives told us they were involved in planning and reviewing people's care. One person said, "I'm always involved with meetings and planning the next steps towards my care package. Occasionally I have meetings with the head of SweetTree." One relative told us, "What I like about their approach is that they were prepared to take some time and sit with me to understand my relative and the situation that we have found ourselves in. Then they work with us to provide a package of care that meets my relative's needs."
- Staff were provided with guidance on how people's needs should be met and they followed given guidelines. People's care plans clearly outlined their needs and included details of people's health conditions, preferences and the level of support they required. One person told us, "My regular carer knows what I need and because of this I would recommend SweetTree."
- Care staff were recruited specifically to meet the needs, preferences and interests of people using the service. People and relatives said considerate matching directly impacted on the quality of care received. One person told us, "I'm happy with the way SweetTree handle things. I told them that I want carers to be of a specific age or older and they have listened to my request." Relatives said, "SweetTree are brilliant at matching young support workers to service users of the same age. They try to develop more meaningful relationships between them and the service user. They have the right ethos as a service."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider followed accessible information standards to ensure people received information in the way they could understand and respond. People's care plans included information on people's communication needs. Staff were trained in different ways of communicating with people. These included the use of Makaton language, story boards or easy read documentation. We saw that various types of communication with people, for example newsletters or safety leaflets were produced in the way that was easy to read.
- People and relatives said the provider communicated with people effectively by using technology, staff learned skills and their knowledge about people and their needs. One relative said, "Staff communicates as much as possible because my relative doesn't have any speech. Carer also reads to him. His carer communicates verbally and he can give thumbs up or down and uses vocalisations. That's his way of letting the carer know whether he's enjoying or having a difficult day."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to maintain their relationship, pursue their hobbies and take part in activities they liked. One person using the service said, "Staff help me go swimming, getting things done on time, shopping, help me deal with my brain injury." Another person said, "I requested that carers have dinner with me and now we do, the calls aren't rushed." One family member told us, "The staff are willing to think outside the box and come up with different ideas. For example, arranging treasure hunts in the local park where he goes walking to make it more interesting."

End of life care and support

- The provider discussed people's wishes regarding care at the end of their lives and dying as part of the initial assessment of their needs. Specific wishes and needs were recorded in people's care plans.
- Staff received training in end of life care to ensure the best support for people at their home at the final stages of their life.
- The provider also launched a series of free later life planning workshops for the members of the community. The aim was to support the wellbeing of the wider community and to raise the awareness of the importance of planning across different areas of life for a safer and better quality later life.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The senior management team was excellent at planning the service for the benefit of people using it. The high standards of planning and service delivery we had found at our last inspection had been built on and developed. The approach taken was to review the overall current situation in the care sector, set out plans accordingly, involve others and review things in a transparent way. This was evidenced by a business presentation prepared and given to us by the provider which detailed the approach taken.
- The governance of the service was outstanding. There was a clear management structure at the service and effectiveness of the management team was high. Managerial responsibilities were divided according to held roles, individual skills, experience as well as the interests and talents of each manager. For example, the service's CEO was experienced and skilled in training others. Therefore, they had been involved in the development and delivery of the training on how to stay safe during the pandemic. The online training and webinars were provided to staff, people and their families, managers at other services and interested members of the community.
- The quality monitoring systems were well developed and maintained and therefore, they ensured effective checks through all levels of the service delivery. A range of audits and reviews was carried out regularly so any gaps in the service delivery were quickly identified and addressed. Monitoring activity was spread across all managerial levels from front line managers monitoring staff and care delivery to senior managers auditing and reviewing the service quality assurance systems. The managers held a range of periodic meetings to ensure consistent review of the quality of the service, compliance with current guidance and regulations and inventive thinking about new care solutions. These included weekly internal compliance meetings, director's meetings, quality assurance and COVID-19 contingency planning meetings and quarterly Advisory Board meetings. The SweetTree Advisory Board is a board that includes senior figures from the health and care industry, such as doctors and independent healthcare consultants, who meet four times a year to evaluate all areas of the service's operations, training and care provision and to advise on new developments within the care industry.
- The leadership was visible and capable and provided ongoing support for people, their families and care staff. Relatives told us, "I know the manager she is excellent" and "There is effective management. They are a very approachable team who always act upon our wishes. It is a very well run and responsive company, which is reassuring within itself." A staff member told us, "I can make contact with the service at any time and obtain a response, and I think the service is well managed."
- Staff knew what was expected of them. Their roles were clearly defined through individual role descriptions for specific departments within the service. Staff were regularly monitored through managerial



checks of direct work with clients as well as regular supervision.

- There was a strong emphasis on continuous training and professional development so care staff and managers' skills were sustained and improved. The service had its own SweetTree Academy that provided Continuing Professional Development (CPD) accredited training to care staff employed by the agency. SweetTree promoted ongoing personal and professional development and encouraged the workforce to progress their career within the service. Therefore, there was the leadership and management framework for existing and aspiring managers and its aim was to help to develop future leaders. The framework was developed by SweetTree and based on Skills For Care Leadership and Management development programme. Skills for Care is an independent registered charity working with adult social care employers in England to set the standards and qualifications for social care workers. For example, the current registered manager progressed his career within the service and was in the process of completing the framework.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service had a strong mission, vision and values and ethics aimed at "assisting people, care staff and members of the wider community to achieve their highest quality of life". These were at the heart of every training, changes and improvement within the service. These were introduced to the staff, people and relatives at the start of their journey with the service and then repeated throughout their involvement with the service. For example, staff were encouraged with ongoing self-development in their supervision meetings and there was a strong emphasis on improving people's quality of life during each care review and daily support provided.

- People using the service and their relatives gave us excellent feedback about SweetTree. People told us, "I definitely would recommend SweetTree because staff are always on time and I get a lot of help when I need it" and "My regular care staff and case manager are important to me. We document everything well, they help me organise rent and bills, fill in forms and whatever else I need help with." Relatives told us, "I have been very impressed with how SweetTree have responded this year. My relative's care staff have been brilliant throughout. They have been helping her with things to help her keep occupied and motivated" and "SweetTree have managed to cope admirably. Overall, they have managed to provide high-quality service throughout this last year."

- The service supported people to reach their full potential working proactively with people to develop their wellbeing and recognising people's health condition. Each person using the service had a highly personalised and detailed care plan describing what support people needed. Care plans were formulated and reviewed in collaboration with people using the service, their relatives and professionals involved in people's care. One family member told us, "We are very happy that they know my relative's needs". A health care professional told us, "The care staff showed great intuition in how we could use the person's motivation to encourage him to access different community activities. They ensure they remain up to date with support plans and recommendations to keep improving people's quality of care."

- Care staff and the managers were ambitious for people using the service. They were able to see beyond people's condition and support them in developing self-confidence and achieving desired goals. One person told us, "I find that because of my condition, a lot of people talk to me as if I was a child. My support worker treats me as an adult and for me, that's the most important thing." A family member told us how staff observed that one person using the service desired to help other people in need. They supported this person in following their calling which led to this person volunteering at three projects supporting vulnerable individuals.

- The service promoted honesty, transparency and instant access to support and advice when needed. Newly introduced accident and incident, safeguarding and complaints online procedure meant that any concerns could be dealt with immediately and by the relevant managers within the service. During the COVID-19 pandemic the service relaunched a new internet website to enable people using the service, their

families and members of the community instant contact with the service's representatives.

- The senior management team was easily accessible to people and their relatives. Their mobile numbers and email addresses were available on the website so people and relatives could contact them directly if they wished to. A family member told us, "The managers are good. They get in contact straight away if there are any issues. We have had lots of conversations."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- SweetTree had undertaken an annual satisfaction survey of people and family member's views of the service. The results of the most recent survey showed high levels of satisfaction across all department of the service. We saw that surveys were analysed and actions on improvement formulated. Surveys were prepared in a format that people could read and understand, for example, an easy read version was available for people who would struggle to read a usual text document.

- People and relatives told us there were ample opportunities to provide feedback about the care received. One person told us, "We all get on very well and communicate well in meetings." Relatives said, "It's mainly been calls or emails this year. They instigated a form which gets sent out to me at the end of each day so I know exactly what's happened with my relative's care. I really value it as I haven't been able to visit as much because of COVID-19" and "They are very good at saying if not happy tell us. I told the manager I was not happy with a carer. They acted on it really quickly."

- Staff were regularly asked for their opinion about the service. SweetTree had undertaken an annual staff satisfaction survey. The last one took place in February 2020. We saw that overall staff were satisfied with their employment at the service. The survey was analysed and action on improvement agreed. Staff could also share their experience in their regular supervision, team meetings as well as ongoing contact with their managers. One staff member told us, "We have the opportunity to evaluate our performance and what we look to improve. This includes the service provided. We are also able to suggest improvements through regular contact with my manager."

- The senior management team ensured staff were appreciated and rewarded for their hard work with people. They continuously told us how proud they were of their team. They said staff commitment and hard work were precious and especially appreciated during the COVID-19 pandemic. An example of this was the yearly SweetTree staff award ceremony to celebrate the best members of SweetTree. The nominations for this award were made by people who use the service. Staff told us how valuable for them it was to be nominated for these awards. One staff member said, "Service users that I work with put me forward for the nomination of awards. It goes without saying that the staff are SweetTree's overall best investment and ambassadors of the service."

Working in partnership with others

- The service was acting to support the local community and the general public. The service was involved in several initiatives aiming to increase overall knowledge about matters related to COVID-19 pandemic, care of older people and receiving care from support services. The initiatives included a series of free, online dementia awareness webinars for a member of the public helping those looking after loved ones through lockdown, Later Life planning events for the general public educating the wider community about the importance of planning for the future.

- We received feedback from 20 external health and social care professionals who all gave a continuously positive view of the service. Some of their comments included, "I have seen many examples of how staff go the extra mile to meet individuals' needs. One person described the dedicated care provided by her carer as "A soft pillow to my very broken soul" and "I believe that the staff are well trained and looked after. SweetTree ensures all their staff do not work with clients until they are absolutely ready to do their jobs correctly. SweetTree are the best Care Company that I have ever been associated with."

- The service collaborated with Skills for Care Charity to provide support and guidance for registered managers in London through the COVID-19 pandemic. One professional told us, "Through the registered manager network, SweetTree engages with dozens of local providers. The providers absorb practice and knowledge from SweetTree which they then use to implement in their own business" and "SweetTree and specifically the CEO, are one of a kind in supporting our sector agenda around the workforce. The CEO is always extremely helpful and giving in supporting other managers. She has a gift for understanding guidance and legislation and then implementing these in a high quality, logical way. SweetTree are really one of a kind in terms of their ethos which is truly clients and staff first."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The senior management team understood their responsibility under the duty of candour. The registered manager said, "It's about informing people and being transparent and truthful about any issues."
- The service worked with the local authority and other stakeholders to investigate concerns raised about people's safety and wellbeing.
- The service dealt promptly with any complaints. Most people said they did not have any complaint about the service, however, when small shortfalls appeared the managers took quick action to address them. A family member told us, "I complained in the early days. They acted straight away. I spoke to the manager."